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CONFIRMATION NO. 8932

Bib Data Sheet

SERIAL NUMBER 10/620,919	FILING OR 371(c) DATE 07/16/2003 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 7996-A03-003
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APPLICANTS

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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ******** 09/05/2003**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 4	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

33771

TITLE

DEVICE FOR TREATMENT OF ORTHOPEDIC FRACTURES

FILING FEE RECEIVED
729

FEES: Authority has been given in Paper
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